Edgar Filing: MAGELLAN HEALTH SERVICES INC - Form 4

MAGELLAN HEALTH SERVICES INC

Form 4

January 11, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average

burden hours per

response...

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

if no longer

subject to

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

LERER RENE				Symbol MAGELLAN HEALTH SERVICES				Iss	Issuer (Check all applicable)				
		IN				NC [MGLN]				(Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X Director 10% OwnerX Officer (give title Other (specify below)					
55 NOD ROAD				01/10/2007					President & COO				
	(Street) 4. If			4. If Am	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				Filed(M	· · · · · · · · · · · · · · · · · · ·				Applicable Line) _X_ Form filed by One Reporting Person				
	AVON, CT	Γ 06001						_	Form filed by More than One Reporting Person				
	(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
	1.Title of Security (Month/Day/Year) 2A. Deemed Execution Date any (Month/Day/			Date, if	3. Transactic Code (Instr. 8)	4. Securition of Disposed of (Instr. 3, 4)	of (D) and 5)		Securities Ownership I Beneficially Form: E Owned Direct (D)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
	Ordinary Common Stock, \$0.01 par value	01/10/2007			X <u>(1)</u>	145,000	A	\$ 11.91	159,671 <u>(2)</u>	D			
	Ordinary Common Stock, \$0.01 par value	01/10/2007			S <u>(1)</u>	145,000	D	\$ 14.4682 (3)	14,671	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of conDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount of Number of Shares
Stock Option (right to buy)	\$ 11.91	01/10/2007		X <u>(1)</u>		145,000	01/05/2007	12/31/2007	Ordinary Common Stock	145,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
LERER RENE								
55 NOD ROAD	X		President & COO					
AVON, CT 06001								

Signatures

/s/ Rene Lerer 01/11/2007

**Signature of Date
Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These transactions were effectuated pursuant to a Rule 10b-5-1 plan and, accordingly, not on a discretionary basis by the reporting person.
- (2) Balance includes 14,671 shares of stock owned prior to reported transaction, of which 11,003 shares are unvested restricted stock.
- (3) Price reflected is the average sale price for shares sold. Please see attached Exhibit 99.1 for a complete list of all sales by sale price.
- (4) No price was applicable to the acquisition of this security.
- (5) The balance of 20,201 options in this tranche are vested and exercisable.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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